LEGISLATIVE AFFAIRS AGENCY

Accounting Office State Capitol, Rm 3 Juneau, Alaska 99801-1182 (907) 465-3852



HOUSEHOLD GOODS AND PERSONAL EFFECTS MOVING AUTHORIZATION

This form must be submitted to LAA Accounting **BEFORE** a Legislator's move.

I,	(Legislator name) request authorization for payment of						
moving company expenses for mo	oving my	household	goods	and	personal	effects	from
(city), v	where I curr	ently reside,	to				_(city)
in accordance with the Legislative Cou	ncil Movin	g and Trave	el Policy.	Actu	al and nec	essary n	noving
expenses will be paid for not more than 3	3,000 pound	ds of househo	old goods	s and j	personal ef	fects. In-	transit
insurance shall not exceed \$200 for a co	onvening m	nove and \$20	00 for an	adjou	rning mov	e. The n	noving
company must provide LAA with a detail	led, descript	ive inventory	of house	ehold g	goods and p	oersonal e	effects.
Moving company:							
Mailing address:							
Phone number:							
NOTE: Household goods and personal hazardous. It is the Legislator's responsible such items depending on the shipping metagoods and hazardous materials that required the same properties of the same personal hazardous materials.	oility to comethod. The Tire special s	nply with all to FSA, AMHS, shipping, or a	federal ar , FedEx a are prohi	nd stat and UI bited.	te regulatio PS websites	ns for sh	ipping
☐ I will pay the moving company a	and request	reimburseme	ent from	LAA,	or		
☐ I request LAA pay the moving co	ompany dire	ectly					
By signing this form, I accept responsible well as any required taxes and state ded		expense of u	nauthori	ized o	r excess ite	ems shipp	ved, as
Legislator Signature				Da	te		
LAA Executive Director Signature				— Da	 te		